

DEC 20 2005

FORMAL

IN RE APPLICATION NUMBER: 10/796,332

TRANSMITTAL COVER LETTER FOR FACSIMILE TRANSMISSION

PLEASE DELIVER THE FOLLOWING PAGES TO:

Mail Stop Amendment
Hon. Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
Attention: Examiner Lloyd A. Gall
Group Art Unit 3676

FACSIMILE NUMBER: (571) 273-8300


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CLIENT/MATTER NO. 000879-0008

CERTIFICATE OF FACSIMILE TRANSMISSION

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December 20, 2005
Date


Edward M. Arons

TOTAL NUMBER OF PAGES, INCLUDING COVER SHEET: 13

DATE: 12/20/05 FACSIMILE OPERATOR: Isatta B. Smith

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PATENTS

Attorney Docket No. AUT/008 Cont.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT APPLICATION

Applicants : Michael Lax et al.

Application No. : 10/796,332 Confirmation No. : 2003

Filed : March 8, 2004

For : CASE WITH INTERNAL LOCK

Group Art Unit : 3676

Examiner : Lloyd A. Gall

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New York, New York 10020
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Alexandria, Virginia 22313-1450

TRANSMITTAL LETTER

Sir:

Transmitted herewith: ☒ Reply To Office Action to be
filed in the above identified patent application.

FEE FOR ADDITIONAL CLAIMS

☒ A fee for additional claims is not required.

☐ A fee for additional claims is required.

The additional fee has been calculated as shown below:

| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | | PRESENT EXTRA | | RATE | | ADDITIONAL FEES |
|---|---|---|---|----|------------------|---|------|----------|--------------------|
| TOTAL CLAIMS | 30 | - | 58 | * | = | 0 | X | \$ 50 | = \$ 0.00 |
| INDEPENDENT CLAIMS | 1 | - | 4 | ** | = | 0 | X | \$ 200 | = \$ 0.00 |
| FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM | | | | | | | | + \$ 360 | = \$ 0.00 |
| | | | | | | | | | |
| | | | | | | | | TOTAL | \$ <u>0.00</u> |
| * If less than 20, insert 20. | | | | | | | | | |
| ** If less than 3, insert 3. | | | | | | | | | |

[] A check in the amount of \$ _____ in payment of the additional claims is transmitted herewith.

[] Please charge \$ _____ to Deposit Account No. _____ in payment of the filing fee.

[X] The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.16 in connection with paper(s) transmitted herewith, or credit any overpayment of same, to deposit Account No. 06-1075, Order No. 000879-0008.

EXTENSION FEE

[] The following extension is applicable to the Reply filed herewith; [] \$120.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.136(a); [] \$450.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.136(a); [] \$1,020.00

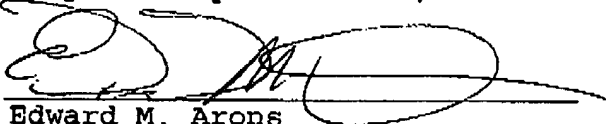
extension fee for response within third month pursuant to 37 C.F.R. § 1.136(a); ☐ \$1,590.00 extension fee for response within fourth month pursuant to 37 C.F.R. § 1.136 (a); ☐ \$2,160.00 extension fee for response within fifth month pursuant to 37 C.F.R. 1.136(a).

☐ A check in the amount of ☐ \$120.00; ☐ \$450.00; ☐ \$1,020.00; ☐ \$1,590.00; ☐ \$2,160.00 in payment of the extension fee is transmitted herewith.

☐ Please charge the ☐ \$120.00; ☐ \$450.00; ☐ \$1,020.00; ☐ \$1,590.00; ☐ \$2,160.00; extension fee to Deposit Account No. _____. A duplicate copy of this transmittal letter is transmitted herewith.

☒ The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or to credit any overpayment of same, to Deposit Account No. 06-1075, Order No. 000879-0008.

Respectfully submitted,



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PATENTS

Attorney Docket No. AUT/008 Cont.

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PATENT APPLICATION

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REPLY TO OFFICE ACTION

Sir:

In reply to the Office Action dated December 12, 2005, applicants amend the above-identified application as follows:

Amendments of the claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 9 of this paper.